					/	23456	
CAMPAIGN FINANCE REPOR STATE OF WISCONSIN	RT			1	1608.82.02	ARCON	Soft In
ls this report an Amendment? Yes					27 T. S.	Sandra L. Juno rown County Clerk	4
COMMITTEE IDENTIFICATION					16.		161.6h
Name of Committee Streckenbach for Brown County	Exec	utive				021223	
Address 205 Miramar Drive						CE USE O	NLY
City, State, ZIP Green Bay, WI 54301			-		GAB:	# ID	
NAME OF REPORT X Jan 2014 Continuing Pre-Prim  July 20 Continuing Pre-election 2	-			Spring Spring		Fall Fall	Special Special
SUMMARY OF RECEIPTS AND DISBURSEMENTS	T (	Column A		Column B	Audit	ed Totals	
1. RECEIPTS	4	his Period		YTD	Office	Use Only	y i
A. Contributions including Loans from Individuals	<del>                                     </del>	\$1,515.00		\$27,465.00			
B. Contributions from Committees (Transfers-In)	\$	100.00	\$	100.00			
C. Other Income and Commercial Loans	\$	-	<b>-</b>				
TOTAL RECEIPTS (Add totals from 1A, 1B, and 1C)	\$	1,615.00	\$	27,565.00			
1. DISBURSEMENTS	<u> </u>		<u> </u>				
A. Gross Expenditures	\$	2,400.00	\$	3,925.95			
B. Contributions to Committees (Transfers-Out)	\$	-					
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$	2,400.00	\$	3,925.95			
CASH SUMMARY							
Cash Balance at Beginning of Report	\$	24,446.59					
Total Receipts	\$	1,615.00					
Subtotal	\$	26,061.59					
Total Disbursements	\$	2,400.00	]				
CASH BALANCE AT END OF REPORT	\$	23,661.59					
INCURRED OBLIGATIONS (at close of period)	\$		1				
LOANS (at close of period)	\$	5,194.02	]	1			
I certify that I have examined this report and to the best of my know	ledge a	nd belief it is tri	ıe, co	rrect aylı eomple	rte.		VE 10044
Type or Print Name of Candidate or Treasurer	Signat	ure of Canadate or	Treas	Mer /		Date 4/	/5/2014
Troy Streckenbach	Email		1	ye y	Dayt	ime Phone	

NOTE: The information on this form is required by ss. 11.06, 11.20, Wis. Stats. Failure to provide this information may subject you to the penalties of ss.11.60, 11.61, Wisconsin Stats.

GAB-2S (03/14) Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984 | Phone: 608-261-2028 | Fax: 608-264-9319 | web: https://cfis.wi.gov | email: GABCFIS@wi.gov

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	×	×	×	×						_	OF CHARLES STATE	3			Herso	ဝဝ	L		Strecker			
	8/23/20	8/23/2013 Finn	8/23/201	8/23/201	9/20/201	7/1/201	02/1//		7/1/201	7/21/201	93202260	DATE	E	<b>T</b>		0	יסטוורעטרר	COMEDINE 1-V	Streckenbach for Brown County Executive			
	8/23/2013 Thayer	13 Finn	8/23/2013 Fecteau	8/23/2013 Durant	9/20/2013 Olejníczak	7/1/2013 Kuehne	//1/2013 vveyers	1	7/1/2013 Horak	7/21/2013 Kress	200						3	4_A	own County			
	John	Micheal	Scott	Kari	Mark	Can	ZCI		Richard	vvillam		AST NAME TRUTT					001101100	Contribu	EXECUTIVE			
	3177 Northwood Road	808 St. Augustine Rd	3168 Warm Springs Drive	203 Cavil Way	1955 E. Telemark	Gills		Do Box 12057	1908 Haybourside	.2376 Duchanne	200	ADDRESS						Contributions Including Loans from Individuals				
	Suamico	Colgate	Green Bay	DePere	Green Bay	Dereid	Older Pay	Green Ray	Longboat Key	Glocit pay	Creen Bay	112	3					m Individuals				
_	VVI DA	_	1				N/I 54115	WI 54307	[F] [34	1	VI 15430	10	2				Will be soon in				· ··-	 -
	54313	5301/	54311	041.10	24313	3 0	115	307	34228		301		710									
•					Nagiro	00160	Retired				President	City		OCCUPALI								
					Clejiiiczan	Oleániozak				,	GB Packaging		NAME	EMPLOTER								
					01 0 th. On 00000	375 w St. Joseph St					1200 N. Webster	2	ADDRESS									
				-	21.2.1.	Green Bay					Green Bay IVVI	2	CITY	Cities		Clarks ACIGNS						
		1				V.						107	STATE		T T				,			
						54301					04001	1007	CODE		<b>∀</b> ER 210					_		
		50.00	50.00	40.00	25.00	150.00	500.00	100.00	100 00	100.00	200.00	500.00	AMOUNT	i				AND STATE OF THE S				
1010,00	1515 00	50,00	50.00	40.00	25.00	150,00	500.00	100.00	100 00	100.00	00.00	500.00	KIU.					Salvaria established				

		IN-KIN			
	8/23/2013	ID DATE		Streckenbac	
	8/23/2013 Rock for State Senate Committee n/a	COMMITTEE NAME	SCHEDULE 1-B	Streckenbach for Brown County Executive	
		GAB ID Number			
	POBox 213	ADDRESS	<b>Contributions from Commit</b>		
	Green Bay	CITY	ommittees		
	Vi	ST			
	Wi 54305	ZIP			
	100.00	AMOUNT			_
100.00		פואַ			

Pg. 3094

	N. P.	
$\dashv$		SCHED PERS
	07/08/	SCHEDULE 2-A PERSO NAL LOAN DATE
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	Consulting	LAST AME/BUSINESS
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		oss Expe
		Expenditures
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	98 Glen P	<u>IT contrib</u>
	W330 N4298 Glen Pare Cir Nashotah	outions
	Nashotah	Gross Expenditures (NOT contributions to other of the contributions to other other other of the contributions to other o
$\vdash$	≦	SI
	53058	mittees
	CGEN	EXPENSE PURPOSE CODE
2,400.00	2,400.00	TNUOMA

fg. 40f4

	N FINANCE REPO MITTEES OF WISC	RT ONSIN	25:202/28 <sub>20</sub> 30
Is This Report an Amendment:  Yes	□ No	1/2	
Instructions for completing schedules are on the b	ick of each schedule.	8 8	N N N
COMMITTEE IDENTIFICATION		/co	CELE MILLION &
Name of Committee  TH SON WISNESKI Far  Street Address	Brain County So	penisor &	Filee use only
PO BOX 28242	· · · · · · · · · · · · · · · · · · ·		
City, State and Zip Code  Geen Ba W 543	24		
Please check if address is different than previously reported,	and complete the Campaign	Registration Statement in	the back of this form.
NAME OF REPORT			
January Continuing Pre-Primary	Spring Fal	Special	Termination Report
July Continuing 13 Pre-Election	Spring Fal	l Special	also complete Schedule 4
SUMMARY OF RECEIPTS AND	C-1 A	Column D	1
DISBURSEMENTS	Column A This Period	Column B Calendar	
1. RECEIPTS	·	Year-To-Date	
1A. Contributions (Including Loans) from Individuals	\$ 834.09	\$	
1B. Contributions from Committees (Transfers-In)	\$	\$	
IC. Other Income and Commercial Loans	\$ <u> </u>	\$	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 834.09	\$	
2. DISBURSEMENTS			
2A. Gross Expenditures	\$ 33602	\$	
2B. Contributions to Committees (Transfers-Out)	s —	\$	
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 336002	\$	
CASH SUMMARY			
Cash Balance Beginning of Report	\$		ì
Total Receipts	\$ 834.09	·	
Subtotal	\$ 834.09		
Total Disbursements	\$ 336,02		
CASH BALANCE END OF REPORT	\$ 498.07		
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$		
LOANS (Balance at the Close of This Period-3B)	\$ 684.09		·
I cortify that I have examined this report and to the best a	f now knowledge and helich	- "It is tena correct and ca	nunl <i>ote</i>

Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date: 2/21/20	NY
TASON WISKESKI	(fee	Daytime Phone: 920	r-713-3577

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2L (Rev. 12/09)

This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

#### SCHEDULE 1-A

# RECEIPTS Contributions (Including Loans) From Individuals

Page \_\_\_\_\_ of \_\_\_\_

Complete Com	millee Name	Cat. Varion		
Instructions fo	or completing schedules are on the back of e	ach schedyle.		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
51113	TASON WIS MESKI	TW Insurance + Notony	\$184.09	
, i	PO BOX 28242	PG BOX 28242	101101	
	Geen Baywit SUBDY			
	1	Gen Bay WIS4324		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place		Calendar
61313	1	Of Employment (if year-to-date total exceeds \$100)	di	Year-to-Date Total
כויכיש	VIDOR WISKESKI	11 (	1250.00	a torian de
	16	T T C		
		0 0 5		
	Check if: ☐ In-Kind ☑ Loan Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	; Occupation, Name and Address of Principal Place ; Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
6,18,13	TASON WISHES	1	\$ 100.00	
	11		\$ 700	
	1 (	, , ,	<u> </u>	
	Check if: In-Kind Coan Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
6-26-13	TASONWISHESKI	Of Employment (if year-to-date total exceeds \$100)	ا ـ بد ا	Year-to-Date Total
( 'JIP' )	V/13010002	10 11	\$ Soras	
	y	F T	"/	
,		E C f		
	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:		0.1
Date	الم المال	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
5-9-13	AME PODERSKI	L	\$100.00	
•	5 New York Blod			
	Edsa HJ08820	\$ 4		
		Conduit Name:		
Date	Check if: Ah-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
6-18-13	JASON CHAPLES	Of Employment (if year-to-date total exceeds \$100)	\$50	Year-to-Date Total
		Retired	\$23-	
	3301 MU2 do CT. 5/34	7001110		
	Esteen Brylla	i. F.		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:  Occupation, Name and Address of Principal Place	Amount	Calendar
	Full Name, Mailing Address and Zip Code	Of Employment (if year-to-date total exceeds \$100)	Amount	Year-to-Date Total
1 1	: :	G G		
		( (	[	
	Check if In-Kind Loan Conduit	Conduit Name:	:	
Date 23	Full Name Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
100		, , , , , , , , , , , , , , , , , , , ,		
\?\\				
/ <u>@</u>	in the second se			
(C)	Check if: In-Kind Loan Conduit	Conduit Name:		
(Q	in the first time to the state of the state		0211 00	
JEG .		OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 129.09	
\2002 S.		TOTAL ITEMIZED CONTRIBUTIONS	\$834.09	
	LOLGS	UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$	Pg. 20 F 9
A		'	001/20	13.
•	TOTAL CO	NTRIBUTIONS RECEIVED FROM INDIVIDUALS	1 8 2407	

## DISBURSEMENTS Gross Expenditures

Page of

Instructions for completing schedules are on the back of each schedule. Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made \$107.66 morketing VIStoprinticom Check if: In-Kind Offset Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made Check if: In-Kind Offset Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Compossh Account Checks order Check if: In-Kind Offset Specific Purpose of Expenditure Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Mad MISTAKEL USIVESK Check if: In-Kind Offset Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: In-Kind Offset Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Check if: In-Kind Offset Full Name, Mailing Address and Zip Code Date Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made Check if: In-Kind Offset Full Name, Mailing Address and Zip Code Date Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made Check if: In-Kind Offset Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made In-Kind Offset SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE **TOTAL ITEMIZED EXPENDITURES TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS** TOTAL EXPENDITURES

	ON FINANCE REPO MITTEES OF WISC	RT CONSIN	0212223 <sub>-24</sub> -25 <sub>-2</sub>
Is This Report an Amendment: Yes	□ No	SCHOOL SECTION	
Instructions for completing schedules are on the ba	ack of each schedule.		
COMMITTEE IDENTIFICATION		62	Senuy, J 89
Name of Committee Jason Wisneski for	Bran Cant	y Soyenso- Electron	TO COUNTY
10 BOX 25242		W.	35050.01
City, State and Zip Code Gen By MT	5 9824		
Please check if address is different than previously reported, a	ınd complete the Campaign	Registration Statement in t	he back of this form.
NAME OF REPORT			
January Continuing 14 Pre-Primary	Spring Fall	1 Special	Termination Report
July Continuing Pre-Election	Spring Fal	I Special	also complete Schedule 4
SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Column B Calendar	
1. RECEIPTS		Year-To-Date	
1A. Contributions (Including Loans) from Individuals	\$ 2795.00	\$ 3,626.09	
1B. Contributions from Committees (Transfers-In)	\$	\$	
1C. Other Income and Commercial Loans	\$	\$	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 2,795,00	\$	
2. DISBURSEMENTS	7		·
2A. Gross Expenditures	\$ 3/9/,87	\$ 3,527.89	
2B. Contributions to Committees (Transfers-Out)	\$ —	\$ '	
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 3,191,87	\$ 3,527.89	
CASH SUMMARY		/	
Cash Balance Beginning of Report	\$ 498.07		
Total Receipts	\$ 2,795,00		
Subtotal	\$ 3293.87		
Total Disbursements	\$ 3/ 9/1 8'/		
CASH BALANCE END OF REPORT	\$ 10/120		
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$		
LOANS (Balance at the Close of This Period-3B)	\$ 3,393.09		
I certify that I have examined this report and to the best of			nplete.

Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date: 2/2/2014
(1, -, -0/		Cy - 4 00.7
TASON WISKESKI	100	Davtime Phone: 930-7/3-3577
	•//	/

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

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# RECEIPTS Contributions (Including Loans) From Individuals

Page <u>1</u> of <u>2</u>

Complete Com	mittee Name	le C 2	ha. (	nd spen	i M		
Instructions to	r completing schedul	es are on the back of ea	ach schedule	My Spen	BOP		
Date	Full Name, Mailing Ad	dress and Zip Code	Occupation, Name	end Address of Prin		Amount	Calendar
19/18/13	TASON 0	UISNESKI	Or Employment (is	year-to-date total exc		<i>(</i> 1)	Year-to-Date Total
100	PO BOXE		VW	I hsoran	CET	\$30.00	
ľ	10 Wyo	10010	č V L	Notam	Lanin		
		Z1W=5437		PO 130X		e de la compansión de l	
Date	Check if: In-Kind Full Name, Mailing Ad		Conduit Name:	and Address of Prin	2)— <i>IVIS932</i> ./ cibal Place	Ì	Calendar
Donate		•		year-to-date total exc		do in	Year-to-Date Total
192010	11	1-1	14	•	v/	\$ 60.00	
<b>'</b>			r t G		,	<b>'</b>	
		<i></i>	C C C				
	Check if: In-Kind		Conduit Name:		***************************************		
Date	Full Name, Mailing Ad	dress and Zip Code		and Address of Pringer year-to-date total except		Amount	Calendar Year-to-Date Total
8213	p	νſ	4		1.1	\$120.00	1
		-			1 (	* .	
						ļ	
	Check if: In-Kind	☐ Łoan  Conduit	Conduit Name:			ŀ	
Date	Full Name, Mailing Ad			and Address of Prin		Amount	Calendar Year-to-Date Total
8,15,13	10	21	Or Employment (ii	year-to-date total exc	λ (	\$ 90.00	rear-to-bate rotal
	, ,		1		• `	4 1000	
			, ,				
	Observation (Fig. 1975)	Tage House	Conduit Name:	•			
Date	Check if: In-Kind Full Name, Mailing Ad		Conduit Name: Occupation, Name	and Address of Prin	cipal Place	Amount	Calendar
& mik	1.	11	Of Employment (if	year-to-date total exc	eeds \$100)	Albert S	Year-to-Date Total
82213	$\mathcal{H}$	* (	11		! (	\$13000	E
	_		T. G. J.				
Date	Check if: In-Kind Full Name, Mailing Ad		Conduit Name:	and Address of Prince	rinal Diago	✓ Amount	Calendar
9/10				year-to-date total exc		$\mathscr{R}$	Year-to-Date Total
1'4'12	11	V (	11		(	100.00	
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	Check if: In-Kind		Conduit Name:				
Date	Full Name, Mailing Ad	ress and Zip Code		and Address of Princ year-to-date total exc		Amount	Calendar Year-to-Date Total
12013	И	£ 1	11		17	\$ 625 ra	Î
			1 \		1 (	11 200	
	Check if: In-Kind	Orduit Conduit	Conduit Name:				
Date	Full Name, Mailing Add	<del></del>		and Address of Princ year-to-date total exc		Amount	Calendar Year-to-Date Total
1 1			Or Employment (it	year-to-date total exc	.ceas #100)	***************************************	real-to-bate rotal
		, i					
222	232032	, , ,					
	Check if: Tin-Kind	☐ Loan☐ Conduit	Conduit Name:			-	
60 5 14010	CHECK II. LANDRIGO				<del></del>	1100	
Page 1	18	SUBT	OTAL ITEMIZED	CONTRIBUTIONS	THIS PAGE	\$ //95.00	
<u>9</u>	8		TOTAL	_ ITEMIZED CONT	RIBUTIONS	\$ '	
T Comment	4/	ΤΟΤΔΙ	UNITEMIZED CO	ONTRIBUTIONS \$	20 OR LESS	\$	pg. 5 of 9
\Q	SHOW A					•	·
Mar.		TOTAL CON	TRIBUTIONS RE	CEIVED FROM IN	NDIVIDUALS	\$	
V66	8782						

## SCHEDULE 1-A

# RECEIPTS Contributions (Including Loans) From Individuals

Page 2 of 2

land discontinued	Tagan Winsky for Braun	Carly Superison		
Date 11 / 13	Mompfeting schedules are on the back of ear Full Name, Mailing Address and Zip Code  TASAV WURSK!	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount #100 coo	Calendar Year-to-Date Total
	Po BOX 28242 Geor Bay UF 543) Check if: In-Kind Coon Conduit	Conduit Name: Gen By MES (3)	<i>"</i>	
11 /15/B	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	#1,000 00	Calendar Year-to-Date Total
	Check if: [] In-Kind [A Loan] Conduit	Conduit Name:		
12/2/3	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	\$450 · a	Calendar Year-to-Date Total
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:  Occupation, Name and Address of Principal Place	Amount	Calendar
7 08 18	Shoe Sortiell 1846 Forth Ave. Gun Boy U4 51802	Of Employment (if year-to-date total exceeds \$100)	Floror	Year-to-Date Total
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name:  Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
11/18/13	1295 Nolake St Neenshulf 54956		\$15.00	
Date	Check if: HrKind Loan Conduit  Full Name, Mailing Address, and Zip Code  MICHAEL HTT	Conduit Name:  Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount \$25pd	Caiendar Year-to-Date Total
:	Sherward W±2 54169 Check if: OH-Kind OLoan Conduit	Conduit Name:		
Date / /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Check if: ☐ In-Kind ☐ Loan☐ Conduit	Conduit Name:		
Date / /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (If year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
G 10212	Check if: Tin-Kind Loan Conduit	Conduit Name:		
(L)	100	OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 1600.00	
	16 (8) 18 (8)	TOTAL ITEMIZED CONTRIBUTIONS	s <b>20</b> 2798	at no s
(2)	77	UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$ 2795m	lg 6 of 9
140/68	TOTAL CON	TRIBUTIONS RECEIVED FROM INDIVIDUALS	5 / 1/5W	

### SCHEDULE 2-A

Complete Committee Name

#### DISBURSEMENTS Gross Expenditures

	I SON WISMOST For Brance	and Openillar		
	completing schedules are on the back of each schedule		Kmount	,
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount	
1113	Yard SIShS 101, com	YARD SISHS	8462100	
	Check if: 🔲 In-Kind Offset	***		
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount	
108/13	Of Person or Business to Whom Payment is Made	· ·	40	
Sp.D	Vistaprinti cam	marketing	\$1/1.99	
	Check if: In-Kind Offset			
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount	
13/13		n u	40	
7 0	M I(		#295.71	
	Check if: In-Kind Offset			
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount	
2/13	*	t t	doc-	
	n 11		\$ 363.91	
	r		//	
Date	Check if:  In-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount	
	Of Person or Business to Whom Payment is Made	<u> </u>	Amount	
28/13	$u = v_1$	10 (1		
	V(		do a so	
			\$ 9.03	
Date	Check if: In-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount	Į.
	Of Person or Business to Whom Payment is Made	•	Amount	
28/13	VI U		# 6	
	• • • • • • • • • • • • • • • • • • • •		\$ 9.03	
	П			
Date	Check if: In-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount	į
	Of Person or Business to Whom Payment is Made		rungone	
11/3	V	10 (1	\$45.33	
			4/3.32	
	on the Education			
Date	Check if: I In-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount	ŀ
į.	Of Person or Business to Whom Payment is Made		\$	
1913	t C	1	CAP ,	La Carlotte
-			109.71	
	Check if:  In-Kind Offset			
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount	-
, ,	Of Person or Business to Whom Payment is Made	Communici Holo	delist	Ì
, ,	Nothan Hochrein	Compain 110g	\$14100	
	1420 QuinetelN.		,	ľ
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## DISBURSEMENTS Gross Expenditures

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## DISBURSEMENTS

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